FORM N-70NP (REV. 1997) 19**97**

STATE OF HAWAII—DEPARTMENT OF TAXATION

EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN

For calendar year 1997 or other taxable year beginning

		•, 1997 and ending •	, 19		AMD	UNP 0			
	Name	e of organization			T	• A Federa	I Employ	er I.D. No.	
Щ.									
TYPE	Dba o	or C/O							
2								e I.D. No.	
F	Addre	ess (number and street)							
PRINT OR									
•	City or town, State and ZIP code							n is a (check	
							ation	Charitable	Trust
	ΔΤΤ	ACH A COPY OF FEDERAL FO) BM	aan.	т т	\cap TI-	1101		RΝ
				330-	1 1	<u> </u>		\L IUI	/ I / I
		R APPROPRIATE AMOUNTS FROM FEDERAL FORM 990-T Gross receipts or sales							
Taxable Income	1	·					1 •		
	2	Returns and allowances					2 •		
	3	Cost of goods sold and/or operations			3 •				
ple	4	Capital gain net income			4 •				
axak	5	Other income			5 •				
_	6	Total unrelated trade or business income					6 •		
	7 8	Unrelated business taxable income					7 • 8		
$\vdash \vdash$	0	Organizations Taxable as Corporations (See Instructions f					0		
Tax Computation	9	Tax — From TAX COMPUTATION SCHEDULE on page 2, Part I, line 5				>	9•		
uta		Trusts Taxable at Trust Rates (See Instructions for Ta					-		
duc	10	Tax — From TAX COMPUTATION SCHEDULE on page 2, Part II, line 10 .	-			➤	10•		
Š	11	Recapture of Capital Goods Excise Tax Credit from Form N-312, Part II (att					11		
Та	12	Total tax (add lines 9 or 10 and 11)		•			12		
	13	(a) Credit for Energy Conservation (attach Form N-157 or N-306)		13(a)•					
		(b) Credit for income tax paid to a state or foreign country by a resident esta		13(b)					
		(c) Enterprise Zone Tax Credit (attach Form N-756)		13(c)•					
		(d) Low-Income Housing Tax Credit (attach Form N-586)		13(d)					
		(e) Credit for Employment of Vocational Rehabilitation Referrals (attach Fo	orm N-884)	13(e)•					
	14	Total (add lines 13(a) through 13(e))				➤	14•		
×	15	Difference — line 12 minus line 14 (but not less than zero)					15		
Total Income Tax	16	Credits and payments:							
om		(a) 1996 overpayment credited to 1997		16(a)•					
n P		(b) Estimated tax payments		16(b)•					
otal		(c) Tax paid with automatic extension of time to file(attach Form N-100 or	N-301)	16(c)•					
1		(d) Credit of shareholder of regulated investment company		16(d)					
		(e) Capital Goods Excise Tax Credit (attach Form N-312)		16(e)•					
		(f) Fuel Tax Credit for Commercial Fishers (attach Form N-308 or N-163A	١)	16(f)•					
		(g) Motion Picture and Film Production Income Tax Credit (attach Form N	,	16(g)•					
		(h) Hotel Remodeling Tax Credit (attach Form N-314)		16(h)•					
		(i) Total credits and payments (add lines 16(a) through 16(h))					16(i)•		
	17	Estimated tax penalty (see Instructions). Check One: Form N-210 Fo			17•				
	18	TAX DUE — If line 16(g) is less than the total of lines 15 and 17, enter amo	,		18•				
	19	OVERPAYMENT — If line 16(g) is larger than the total of lines 15 and 17, e	enter amount	overpaid .			19•		
	20	Amount of line 19 you want Credited to 1998 estimated tax ➤ 20(a)\$• I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompany)	nnanving schedul	es or statemen		funded >	` ,	he heet of my kni	owledge
	ase	and belief, is a true, correct, and complete return, made in good faith, for the taxable year stated, p					unu, tu t	Soot of filly Kill	- mouge
Sig		> .			>				
He	E	Signature of officer Date				Title			
		Preparer's	Date	Che	eck if	F	Preparer's s	ocial security nur	mber
Paid Pre		Signature			-employed				
Preparer's Information		Fodorol -			eral >	'			
		address			CODE ➤				
								FOR	AN ZONE

TAX COMPUTATION SCHEDULE

PΑ	RTI — Corporations					
1	Enter the amount of unrelated business taxable income as shown on page 1, line 8	1				
2	Enter the amount of taxable net capital gain as shown on page 1, line 4	2				
-	Enter the difficult of taxable flot capital gain as shown on page 1, line 4					
3	Line 1 minus line 2 (if less than zero, enter zero)	3				
	(a) Town of a situation 400 of a second or live 0	4/->				
4	(a) Tax on net capital gain — 4% of amount on line 2	4(a)				
	(b) Tax on all other taxable income — If amount on line 3 is:	4/1-3/33				
	(i) Not over \$25,000 — Enter 4.4% of line 3	4(b)(i)				
	(ii) Over \$25,000 but not over \$100,000 — Enter 5.4% of line 3 \$. Subtract \$250 and enter difference	4/b\/;;\				
	of line 3 \$ Subtract \$250 and enter difference	4(b)(ii)				
	(iii) Over \$100,000 — Enter 6.4%					
	of line 3 \$. Subtract \$1,250 and enter difference	4(b)(iii)				
	Of fine 6 \$\psi Outstact \$\psi_{1,200}\$ and office an office \$\psi_{1,200}\$ and office \$\psi_{1,200}\$.	+(2)()				
	(c) Total of lines 4(a) and 4(b)	4(c)				
	(d) Using the rates listed on line 4(b), compute tax on unrelated business taxable income as shown on line 1	4(d)				
5	Total tax (enter lesser of amount on line 4(c) or 4(d))	5				
	Also, enter this amount on page 1, line 9.					
	Objectivable Treats					
	RT — Charitable Trusts					
	1 Unrelated business taxable income (page 1, line 8)					
2	Net capital gain taxable to the trust. Enter the smaller of line 16 or 17, col. (b), Schedule D (Form N-40)					
•	If this line is zero, GO TO LINE 9					
3 4	Enter the greater of line 3 or \$3,500.					
5	Tax on amount on line 4. If line 4 is \$3,500, enter \$130.00					
6	Difference — line 1 minus line 4.					
7	Multiply the amount on line 6 by 7.25%					
8	Tax. Add lines 5 and 7					
9	Tax on amount on line 1 above					
10	Enter the lesser of line 8 or line 9 here and on page 1, line 10					

TRUST TAX RATES								
If the taxable income is:	The tax shall be:							
Not over \$1,500	2% of taxable income							
Over \$1,500 but not over \$2,500	\$30.00 plus 4% of excess over \$1,500							
Over \$2,500 but not over \$3,500	\$70.00 plus 6% of excess over \$2,500							
Over \$3,500 but not over \$5,500	\$130.00 plus 7.25% of excess over \$3,500							
Over \$5,500 but not over \$10,500	\$275.00 plus 8% of excess over \$5,500							
Over \$10,500 but not over \$15,500	\$675.00 plus 8.75% of excess over \$10,500							
Over \$15,500 but not over \$20,500	\$1,112.50 plus 9.5% of excess over \$15,500							
Over \$20,500	\$1,587.50 plus 10% of excess over \$20,500							